

CHAPTER 13
 SECTION 9.1
 ADDENDUM 1, SECTION 9

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES -
 MALE GENITAL SYSTEM

The number following the procedure code is the TRICARE payment group.

PENIS

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>INCISION</u>		
54000	4	Slitting of prepuce, dorsal or lateral (separate procedure); newborn
54001	4	Slitting of prepuce, dorsal or lateral (separate procedure); except newborn
54015 ²	6	Incision and drainage of penis, deep
<u>DESTRUCTION</u>		
54057	2	Destruction of lesion(s), penis (eg, condyloma, papilloma, mollusum contagiosum, herpetic vesicle), simple; laser surgery
54060	2	Destruction of lesion(s), penis (eg, condyloma, papilloma, mollusum contagiosum, herpetic vesicle), simple; surgical excision
54065	2	Destruction of lesion(s), penis (eg, condyloma, papilloma, mollusum contagiosum, herpetic vesicle), extensive, any method
<u>EXCISION</u>		
54100	2	Biopsy of penis; cutaneous (separate procedure)
54105	2	Biopsy of penis; deep structures
54110	4	Excision of penile plaque (Peyronie disease)
54115	2	Removal foreign body from deep penile tissue (eg, plastic implant)
54120	4	Amputation of penis; partial
54125	4	Amputation of penis; complete
54150	1	Circumcision, using clamp or other device; newborn
54152	2	Circumcision, using clamp or other device; except newborn
54160	2	Circumcision, surgical excision other than clamp, device or dorsal slit; newborn
54161	4	Circumcision, surgical excision other than clamp device or dorsal slit; except newborn
<u>INTRODUCTION</u>		
54205 ²	6	Injection procedure for Peyronie disease; with surgical exposure of plaque
54220	2	Irrigation of corpora cavernosa for priapism
<u>REPAIR</u>		
54300	5	Plastic operation of penis for straightening of chordee (eg, hypospadias), with or without mobilization of urethra
54360	5	Plastic operation on penis to correct angulation
54420	6	Corpora cavernosa-saphenous vein shunt (priapism operation), unilateral or bilateral

PENIS (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
54435	6	Corpora cavernosa-glans penis fistulization (eg, biopsy needle, Winter procedure, rongeur, or punch) for priapism
54440	6	Plastic operation of penis for injury

MANIPULATION

54450	2	Foreskin manipulation including lysis of preputial adhesions and stretching
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TESTIS

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>EXCISION</u>		
54500	2	Biopsy of testis, needle (separate procedure)
54505	2	Biopsy of testis, incisional (separate procedure)
54510	4	Excision of local lesion of testis
54520	7	Orchiectomy, simple (including subcapsular), with or without testicular prosthesis, scrotal or inguinal approach
54530	6	Orchiectomy, radical, for tumor; inguinal approach
54550	6	Exploration for undescended testis (inguinal or scrotal area)

REPAIR

54600	6	Reduction of torsion of testis, surgical, with or without fixation of contralateral testis
54620	5	Fixation of contralateral testis (separate procedure)
54640	6	Orchiopexy, any type, with or without hernia repair
54660	4	Insertion of testicular prosthesis (separate procedure)
54670	5	Suture or repair of testicular injury
54680	5	Transplantation of testis(es) to thigh (because of scrotal destruction)

EPIDIDYMIS

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
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INCISION

54700	4	Incision and drainage of epididymis, testis and/or scrotal space (eg, abscess or hematoma)
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EXCISION

54800	2	Biopsy of epididymis, needle
54820	2	Exploration of epididymis, with or without biopsy
54830	5	Excision of local lesion of epididymis
54840	6	Excision of spermatocele, with or without epididymectomy
54860	5	Epididymectomy; unilateral
54861	6	Epididymectomy; bilateral

REPAIR

54900	6	Epididymovasostomy, anastomosis of epididymis to vas deferens; unilateral
54901	6	Epididymovasostomy, anastomosis of epididymis to vas deferens; bilateral

TUNICA VAGINALIS

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>EXCISION</u>		
55040	6	Excision of hydrocele; unilateral
55041	7	Excision of hydrocele; bilateral
<u>REPAIR</u>		
55060	6	Repair of tunica vaginalis hydrocele (Bottle type)

SCROTUM

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>INCISION</u>		
55100	2	Drainage of scrotal wall abscess
55110	4	Scrotal exploration
55120	4	Removal of foreign body in scrotum
<u>EXCISION</u>		
55150	2	Resection of scrotum
<u>REPAIR</u>		
55175	2	Scrotoplasty; simple
55180	4	Scrotoplasty; complicated

VAS DEFERENS

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>INCISION</u>		
55200	4	Vasotomy, cannulization with or without incision of vas, unilateral or bilateral (separate procedure)
<u>REPAIR</u>		
55400	2	Vasovasostomy, vasovasorrhaphy

SPERMATIC CORD

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>EXCISION</u>		
55500	5	Excision of hydrocele of spermatic cord, unilateral (separate procedure)
55520	6	Excision of lesion of spermatic cord (separate procedure)
55530	6	Excision of varicocele or ligation of spermatic veins for varicocele; (separate procedure)
55535	6	Excision of varicocele or ligation of spermatic veins for varicocele; abdominal approach
55540	7	Excision of varicocele or ligation of spermatic veins for varicocele; with hernia repair

SEMINAL VESICLES

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>INCISION</u>		
55600	2	Vesiculotomy
55605	2	Vesiculotomy; complicated
<u>EXCISION</u>		
55650	2	Vesiculectomy, any approach
55680	2	Excision of Mullerian duct cyst

PROSTATE

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
<u>INCISION</u>		
55700	3	Biopsy, prostate; needle or punch, single or multiple, any approach
55705	4	Biopsy, prostate; incisional any approach
55720	2	Prostatotomy, external drainage of prostatic abscess, any approach; simple

Except as provided below, all procedures are effective as of November 1, 1994

- 1 Code added for services performed on or after January 1, 1995
- 2 Code added for services performed on or after February 27, 1995
- 3 Code deleted for services performed on or after April 1, 1995
- 4 Code deleted for services performed on or after April 26, 1995
- 5 Payment group changed for services performed on or after February 27, 1995
- 6 Code added October 1995 effective for services performed on or after November 1, 1994
- 7 Code deleted for services performed on or after March 31, 1996
- 8 Code added for services performed on or after January 1, 1996
- 9 Code added for services performed on or after January 1, 1997
- 10 Code deleted for services performed on or after January 1, 1997
- 11 Code added for services performed on or after November 1, 1998